



STATE OF IOWA

CHESTER J. CULVER, GOVERNOR
PATTY JUDGE, LT. GOVERNOR

DEPARTMENT OF HUMAN SERVICES
KEVIN W. CONCANNON, DIRECTOR

INFORMATIONAL LETTER NO. 637

August 21, 2007

TO: Iowa Medicaid Participating Providers (Excluding CDAC)

FROM: Iowa Department of Human Services
Iowa Medicaid Enterprise

SUBJECT: Timely Filing Requirements

EFFECTIVE: Immediately

The Iowa Medicaid Enterprise wishes to remind providers of the IME policy on timely filing requirements for resubmitting a claim for payment. This reminder applies to those claims that were previously denied and are now being resubmitted to the IME after 365 days from the last date of service on the claim. Claims that are not past the 365 day guideline are to continue to be billed in the regular manner (either electronically or on paper).

Providers can resubmit a claim for potential payment if the denied claim was originally submitted within 365 days of the last date that a service was rendered or as is otherwise acceptable according to 441 IAC 80.4. A copy of the Medicaid remittance advice showing this original submission denial should be attached to the claim when it is resubmitted after 365 days from the last date of service. The resubmitted claim must be received at the IME within 365 days of the Medicaid remittance advice date for the denial. An Exception to Policy will not be granted by DHS Policy Staff to waive timely filing guidelines.

Claims should not be sent to the Department of Human Services. This will delay the processing of these claims. Resubmitted claims for services past 365 days from the last date of service should be sent to the regular IME claims address (see below) and will be processed according to the timeline described above. Claims addresses:

- For regular claims and resubmission claims: Medicaid Claims, PO Box 150001, Des Moines, IA 50315.
- For Exception to Policy claims: Iowa Medicaid Enterprise, Exception Processing, 1305 East Walnut Street, Des Moines, IA 50319.

Two exceptions exist to the 365 timely filing guideline: retroactive eligibility and Third-party related delays. Each of these must be billed on paper with the proper attachment.

- Retroactive eligibility must be accompanied by the DHS Notice of Decision and must be received at the IME within 365 days of the notice date. Mail claim to: Iowa Medicaid Enterprise, Exception Processing, 1305 East Walnut Street, Des Moines, IA 50319.
- Third-party related delays must be accompanied by a copy of the TPL explanation of benefits and must be received at the IME within 365 days of the TPL process date. Mail claim to Medicaid Claims, PO Box 150001, Des Moines, IA 50315.

Providers that wish to begin electronic filing can contact EDISS at www.noridianmedicare.com or edi@noridian.com. Electronic claims submission is a much cleaner and faster method to bill claims.

If you have any questions, please contact IME Provider Services, at 1-800-338-7909, or locally in Des Moines at 515-725-1004, or by e-mail at: imeproviderservices@dhs.state.ia.us.